

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000103256

FILED
Aug 03, 2009
Secretary of State**Entity Name:** INTERNATIONAL DIAMOND EXCHANGE FORT MYERS, LLC**Current Principal Place of Business:**4480 CLEVELAND AVE.
FORT MYERS, FL 33901**New Principal Place of Business:****Current Mailing Address:**4480 CLEVELAND AVE
FORT MYERS, FL 33901**New Mailing Address:****FEI Number:** 26-3670140**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RAAB, DOMINIKA M SECRETA
4480 CLEVELAND AVE
FORT MYERS, FL 33901 US**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** MGRM () Delete
Name: KLEIN, LAWRENCE B
Address: 4480 CLEVELAND AVE
City-St-Zip: FORT MYERS, FL 33901**Title:** SECR () Delete
Name: RAAB, DOMINIKA M SECRETA
Address: 4480 CLEVELAND AVE
City-St-Zip: FORT MEYERS, FL 33901**ADDITIONS/CHANGES:****Title:** MGRM (X) Change () Addition
Name: RAAB, DOMINIKA M
Address: 4480 CLEVELAND AVE
City-St-Zip: FORT MYERS, FL 33901**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DOMINIKA RAAB

MGR

08/03/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date